FORM D

**UNITED STATES** RITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:	May 31, 2005						
Estimated average							

.16.00

SEC USE ONLY				
Prefix	Serial			
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DATE R	ECEIVED			
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hours per response.

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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  NOR WEST PROPERTIES LLC INITIAL O	FERING
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	
Type of Filing: Mew Filing Amendment	
Type or time.	
A. BASIC IDENTIFICATION DATA	LARTH COLOR AND DEVI OF DE SAME COMPANY OF THE COLOR
1. Enter the information requested about the issuer	
	—
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
NOR WEST PROPERTIES LLC	05003479
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone
PO BOX 430, 11003 NE CALIFORNA ST	360 - 297 - 5955
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
(if different from Executive Offices) KINGSTON WA 98346	
D. CD	
Brief Description of Business	
pool and to dovelop mont comment	in western WA
Real estate development company	IN WESTON OFF
Type of Business Organization   limited partnership, already formed   other (p.	lanca specifich
= = = = = = = = = = = = = = = = = = =	
	LIABILITY COMPANY
Month Year	Already formed
Actual or Estimated Date of Incorporation or Organization:	
CN for Canada; FN for other foreign jurisdiction)	da wa

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

1 of 9

		A. BASIC IDE	ENTIF	ICATION DATA						
Enter the information re	quested for the fo	llowing:								
<ul> <li>Each promoter of t</li> </ul>	he issuer, if the iss	suer has been organized w	ithin tl	ne past five years;						
Each beneficial ow	ner having the pow	er to vote or dispose, or di	rect the	vote or disposition	of, 109	% or more	of a clas	s of equity se	curities o	f the issuer.
<ul> <li>Each executive off</li> </ul>	icer and director o	f corporate issuers and of	corpor	ate general and man	aging	partners o	f partne	rship issuers:	and	
Each general and n	nanaging partner o	f partnership issuers.								
Check Box(es) that Apply:	Promoter Promoter	Beneficial Owner		Executive Officer		Director	X	General and		
EBE 2HAP	TEL	PAUL					•	Managing 1	Partner	
ull Name (Last name first, i	f individual)									
POBOX 430	. 11003	NE CALIF	<b>-</b> O	2NIA 5	Γ.	$\kappa$	NGE	STON	WA	9834
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)			•				
Check Box(es) that Apply:	Y Promoter	Beneficial Owner		Executive Officer		Director		General and	/or	
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ull Name (Last name first, i	f individual)			<del></del>						
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Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	* 4 .28 .	4		, no. co			
		TT	-	. No seeper one	f	-44 } X			'	
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	, · 🔲	Director		General and Managing		
ull Name (Last name first, i	f individual)						-		· · ·	
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Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)							
Check Box(es) that Apply:	Promoter	Beneficial-Owner		Executive Officer		Director		General and	/or	
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Full Name (Last name first, i	f individual)		<del></del>							
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Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	$\overline{\Box}$	Director		General and	/or	
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Full Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·							· · · · · · · · · · · · · · · · · · ·	
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Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)	· · · · · · · · · · · · · · · · · · ·						<del></del>
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Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and Managing		
Full Name (Last name first,	if individual)				·-··					
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Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		· <u>-</u>					
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and	/or	
	-	_			_			Managing	Partner	·
Full Name (Last name first,	if individual)			-,40-						
Business or Residence Addre	es (Number and	Street, City, State, Zip Co	ode)							
	ou (Aumber and	Succe, Only, State, Elp C	Jue)							

					B. IN	FORMAT	ION ABOU	T OFFERI	<b>VG</b>				
	T T								AL! CC:-	-0		Yes	No
1.	Has the i	issuer soid	, or ages in					nvestors in			••••••••	X	
2	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?								.5	000			
2.	what is the minimum investment that will be accepted from any individual?									Yes	No		
3.	. Does the offering permit joint ownership of a single unit?									•••••••		No	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.										e			
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Busi	ness or F	Casidanca	HLN Address (N	AVC	Street Ci	TY State	YCE Zin Code)	>					
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	e of Asso	ociated Br	oker or Dea	ler	-14				<u> </u>		<u> </u>		
1			95T		<u> </u>								
							Purchasers						
	(Check '	'All States	or check	individuai	States)	••••••		•••••••••	***************************************	•••••••	• • • • • • • • • • • • • • • • • • • •	L AI	1 States
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Full	Full Name (Last name first, if individual)												
Busi	ness or	Residence	Address (N	lumber an	d Street, C	ity, State,	Zip Code)						
Nam	e of Ass	ociated Br	oker or Dea	aler									
										_			
							Purchasers						
	(Check '	'All States	" or check	individual	States)	•••••••	• • • • • • • • • • • • • • • • • • • •	•••••	***************************************	••••••		Al	1 States
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	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (L	ast name	first, if indi	vidual)		-	··································						
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Dusi	ness or	Residence	Address (r	vumber an	a Sireei, C	ity, state,	Zip Code)						
Nam	e of Ass	ociated Br	oker or De	aler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	3					
								***************************************	·····	••••••		.   Al	1 States
	AL	AK	ΑZ	AR	CA	CO	[CT]	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Turn of Country	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	s	s_ <del>-</del>
	Equity	<u>s1,000,000</u>	s_ <del>-O</del>
	Common Preferred		
	Convertible Securities (including warrants)	s_ <del>-0-</del>	s_ <del>-0-</del>
	Partnership Interests	s_ <del>-0</del>	s_ <del>-0</del>
	Other (Specify)	s_ <del>O</del>	s_ <del>-O-</del>
	Total	s 1,000,000	) <sub>\$</sub> 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.	, , , , , , , , , , , , , , , , , , , ,	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	;	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	-0	s_ <del>0</del>
	Non-accredited Investors		s <del>-0</del>
	Total (for filings under Rule 504 only)	0	\$ 0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$S
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	;	
	Transfer Agent's Fees		s
	Printing and Engraving Costs	<b>y</b>	s 3,500
	Legal Fees	<u>F</u>	s 10,000
	Accounting Fees	<b>Z</b>	s 6,200
	Engineering Fees		s 2,000
	Sales Commissions (specify finders' fees separately)	<del>-</del>	s 100,000
	Other Expenses (identify)	<u>F</u>	s <del>0</del>
	Total		s121,700

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF F	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS						
b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		s <u>878,300</u>					
Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		Ç					
	Payments to Officers, Directors, & Affiliates	Payments to Others					
Salaries and fees	vs25000	" <b>冶</b> \$					
Purchase of real estate	<b>Z</b> \$	28 356,50					
Purchase, rental or leasing and installation of machinery and equipment	<b>/</b> \$	Es 2,000					
Construction or leasing of plant buildings and facilities	<b>S</b> \$	S 100,000					
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	<b></b>	<u>√s/00,00</u>					
Repayment of indebtedness	\$	<b>2</b> /\$					
Working capital	<b>@</b> \$	15/0,000					
Other (specify): CONSULTANTS	<b>D</b> '\$	12/5 60,00					
	\$	· . 🗆 \$					
Column Totals	±2500a	Des 628 13					
Total Payments Listed (column totals added)	Z \$ 1	378,300					

5.

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor jursuality paragraph (b)(2) of Rule 502.

ssuer (Print or Type)	Signature	Date / /	
NOR WEST PROPERTES LLC	// WW 1/ )	3/10/05	
	Thtle of Signer (Print or Type)		
PAUL J. EBEPHARTER	, MANAGUNG 1	MEMPER .	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)